

Testimony on SB 149
Committee on Aging

My name is Mary Strauss. I am a licensed clinical social worker and an adjunct instructor of Social Gerontology at Albertus Magnus College. I have worked with older adults and people with physical and/or mental challenges for over 28 years. I have worked in medical and geri-psych hospital care, home care, adult day care, short-term rehabilitation and skilled nursing home care. I am writing this testimony in support of *Proposed S.B. No. 149 AN ACT CONCERNING IMPROVED SOCIAL WORKER TO RESIDENT RATIOS IN NURSING HOMES.

I have worked as a nursing home social worker for two of the best nursing homes in this state. As a nursing home social worker I worked with clients with a multitude of complex medical conditions, as well as others who were Holocaust survivors, homeless people, Veterans, people with substance abuse problems, traumatic brain injuries and many other complex medical and psychological conditions.

According to a 1992 federal study documented by the Administration on Aging, although Connecticut is one of the richest states in the nation, CT ranked at an incredible low of 49th out of the 50 states and the District of Colombia in the development of alternatives to institutionalization. Nursing homes are often the place that our most vulnerable, disenfranchised citizens must live in.

I presently work as a psychotherapist for a geriatric psychiatrist's office and my patients are older adults who are fortunate enough to have been referred for geriatric psychiatry services. However, many individuals who reside in nursing homes do not receive the benefit of a psychiatric social worker with a specialty in gerontology. Many patients will never get the one to one psychotherapy that they desperately need.

I have worked with people who have become so depressed that they have made several suicide attempts. According to www.elderlawanswers.com/resources: "Over 50% of elders in nursing homes are depressed." According to a study by the noted gerontologist, Jane Brody in 1998: "Most nursing home residents fail to receive the mental health services they could benefit from." A study by Dellegasa (1991) indicated that 85% of older adults needing mental health services are underserved. According to the National Institute for Mental Health, the Center for Disease Control and the National Center for Health Statistics the highest rate of suicides in our country are completed by Caucasian men over age eighty five—a rate almost twice that of the rest of the population.

While some facilities are lucky to have fine geriatric psychiatrists consult for them, the vast majority of counseling is done by the nursing home's social worker. However, in addition, a nursing home social worker must advocate for their clients and perform a multitude of skilled services such as individual, family and group counseling, discharge planning, coordinating care with a multitude of complex health and social service agencies, end of life care and hospice care, community outreach, legal duties such as applying for conservatorship, protecting patient rights, arranging for pastoral care and rehabilitation services, assessing for signs and symptoms of abuse, helping families deal with crisis and assessments of cognitive functioning and mental health.

Given that the older population is growing, and that there is a desperate need for mental health services, and given the complexity of a nursing home social worker's role, it only makes logical sense that social work be performed by trained, credentialed social workers whose workload is of a manageable level. The current ratio of 120 patients to one social worker is absurd and inhumane. Please support *Proposed S.B. No. 149 AN ACT CONCERNING IMPROVED SOCIAL WORKER TO RESIDENT RATIOS IN NURSING HOMES so that our elders, who have contributed to their nation will receive the care that they need and deserve.